

MAR 13 2007

FAX TRANSMISSION

DATE: March 13, 2007

PTO IDENTIFIER: Application Number 10/800,168-Conf. #9057
Patent Number

Inventor: Naoyuki ENJOJI et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: LAHIVE & COCKFIELD, LLP
Anthony A. Laurentano/Ishna Neamatullah

PHONE: (617) 227-7400

Attorney Dkt. #: TOW-068

PAGES (Including Cover Sheet): 18

CONTENTS: Fax Transmission (1 page)
Certificate of Transmission (1 page)
Transmittal Form (1 page)
Fee Transmittal (1 page, in duplicate)
Amendment in Response to Non-Final Office Action (12 pages)
Petition for One Month Extension of Time (1 page)
Charge \$320.00 to deposit account 12-0080

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 227-7400 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

LAHIVE & COCKFIELD, LLP
One Post Office Square, Boston, Massachusetts 02109-2127
Telephone: (617) 227-7400 Facsimile: (617) 742-4214

BEST AVAILABLE COPY

MAR 13 2007

PTO/SB/07 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031
U. S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/800,188

Attorney Docket No.: TOW-088

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on March 13, 2007 .
Date


Signature

Anthony A. Laurentano

Typed or printed name of person signing Certificate

38,220
Registration Number, if applicable

(617) 227-7400
Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Certificate of Transmission (1 page)
 Fax Transmission (1 page)
 Transmittal Form (1 page)
 Fee Transmittal (1 page, in duplicate)
 Amendment in Response to Non-Final Office Action (12 pages)
 Petition for One Month Extension of Time (1 page)
 Charge \$320.00 to deposit account 12-0080

MAR 13 2007

PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

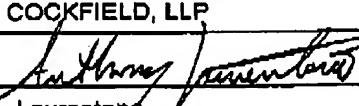
(to be used for all correspondence after initial filing)

		Application Number	10/800,168-Conf. #9057
		Filing Date	March 12, 2004
		First Named Inventor	Naoyuki ENJOJI
		Art Unit	1745
		Examiner Name	E. Wang
Total Number of Pages in This Submission		Attorney Docket Number	TOW-068

ENCLOSURES (Check all that apply)

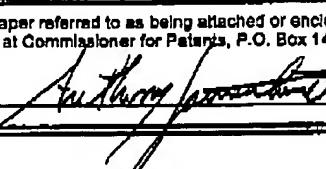
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fee Transmittal (in duplicate); Petition for Extension of Time under 37 CFR 1.138(a); Certificate of Transmission; Fax Transmission
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Anthony A. Laurentano		
Date	March 13, 2007	Reg. No.	38,220

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (671) 273-8300 at Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 13, 2007

Signature:  (Anthony A. Laurentano)

MAR 13 2007

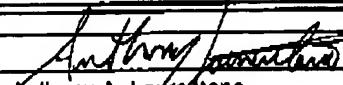
PTO/SB/17 (07-08)

Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

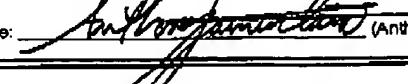
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006		Complete If Known	
		Application Number	10/800,168-Conf. #9057
		Filing Date	March 12, 2004
		First Named Inventor	Naoyuki ENJOJI
		Examiner Name	E. Wang
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1745
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.	TOW-068

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description							
Each claim over 20 (including Reissues) _____ 50 25							
Each independent claim over 3 (including Reissues) _____ 200 100							
Multiple dependent claims _____ 360 180							
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
16	20	x	=	Fee (\$)	Fee Paid (\$)	_____	
HP = Highest number of total claims paid for, if greater than 20. _____							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____			
4	3	x 200.00	= 200.00	_____			
HP = Highest number of independent claims paid for, if greater than 3. _____							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	/50	(round up to a whole number) x		=		Fee Paid (\$)	
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount) _____ 120.00							
Other (e.g., late filing surcharge): 1251 Extension for response within first month _____							
SUBMITTED BY							
Signature				Registration No. (Attorney/Agent)	38,220	Telephone	(617) 227-7400
Name (Print/Type)	Anthony A. Laurentano			Date March 13, 2007			

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300 at Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 13, 2007

Signature:  (Anthony A. Laurentano)